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2352 7590 07/02/2004

**OSTROLENK FABER GERB & SOFFEN**  
**1180 AVENUE OF THE AMERICAS**  
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<b>Robert C. Faber, 24,322</b>	(Depositor's name)
<i>Robert C. Faber</i>	(Signature)
<b>September 9, 2004</b>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/088,944	03/21/2002	Hugues Berton	P/3255-62	4657

TITLE OF INVENTION: CATHODIC PROTECTION DEVICE FOR FLEXIBLE PIPES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	10/04/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
BELL, BRUCE F	1746	204-196200

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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**COFLEXIP****FRANCE**Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
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(Authorized Signature)

**Robert C. Faber, 24,322 9/9/04****09/14/2004 DENMANU2 00000085 10088944**

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01 FC:1501 1330.00 OP

02 FC:1504 300.00 OP

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